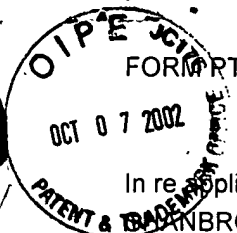


\$1744



25864.00600

FORM PTO-1083

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:  
BROM, Edward

Art Unit: 1744  
Examiner: K. OLSEN

Serial No: 09/315,688  
Filed: May 20, 1999  
For: METHOD FOR QUANTIFYING ANTIOXIDANT LEVELS  
IN FOOD AND MEDICAL SPECIMENS

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:  
Commissioner for Patents  
Washington D.C. 20231, on  
September 30, 2002  
Date of Deposit  
Heather B. Del Bosco  
Name  
Signature Heather B. Del Bosco Date 09/30/02

Commissioner for Patents  
Washington, D.C. 20231

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ Small entity status has been claimed. See 37 CFR § 1.27.
- ☐ A certified copy of \_\_\_ Patent Application No. \_\_\_ filed \_\_\_ from which priority is claimed under 35 U.S.C. § 119 is enclosed.
- ☒ Petition for Extension of Time (3 months)
- ☒ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	5	-	5 **	0	LG=\$18 SM=\$9	\$0
INDEPENDENT CLAIMS FEE	3	-	3 ***	0	LG=\$84 SM=\$42	\$0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$280 SMALL ENTITY FEE = \$140	\$0
TOTAL						\$0

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ A check in the amount of \$\_\_\_ to cover the additional claims fee is enclosed. **A copy of this sheet is enclosed.**
- ☐ A check in the amount of \$\_\_\_ to cover the extension fee is enclosed. **A copy of this sheet is enclosed.**
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1796, referencing docket number 25864.00600. **A copy of this sheet is enclosed.**
  - ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
  - ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,  
CROSBY, HEAFEY, ROACH & May

Date: September 30, 2002

By: Stefan J. Kirchanski

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